(c) if so, the reasons for this anomaly;

(d) by when this anomaly would be resolved; and

(e) if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) No, Sir. ACP is granted to the eligible employees in accordance with the instructions issued by the Government and the clarifications issued thereon from time to time.

(b) to (e) The pay scale granted to the Ex-Hindi Officer of the Central Research Institute (CRI), Kasauli was in accordance with the instructions on grant of ACP issued by the Government. The higher scale of pay granted to the Hindi Officer in Dr. RML Hospital, New Delhi was on specific directions of the Hon'ble Central Administrative Tribunal (CAT), Delhi in that particular case in OANo. 1190/2005, which cannot be deemed as an anomaly.

CGHS Unani unit

2006.SHRI DWIJENDRANATH SHARMAH: Will the Minister of HEALTH AND FAMILY
WELFARE be pleased to state:

(a) whether a CGHS Unani has been opened by CGHS in trans-Yamuna area of East Delhi, if so, when;

(b) whether this was opened for convenience of public or for favouring a CGHS Unani Physician residing in the same area;

(c) if it was for public convenience, the date since when the post of CGHS Unani Physician is lying vacant in that Unit; and

(d) the officials responsible for delaying the deployment of physician in the said Unit?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) Yes, Sir. It was opened on 18.3.2004.

(b) and (c) After doctor Mohd. Shammon, Unani Physician took voluntary retirement on 4.4.2007 (FN), the beneficiaries of Trans Yamuna dispensaries have been attached with Daryaganj Unani Unit.

(d) There is a shortage of Unani physicians in the CGHS. UPSC has made selections to the post of Medical Officer (Unani) in the CGHS and appointment and postings will be made after the necessary formalities are completed. Hence, no official is responsible for the delay in the posting of a Unani Physician in the dispensary.

Adverse effect of mobile phones

2007.SHRIMATI SHOBHANA BHARTIA: Will the Minister of HEALTH AND FAMILY
WELFARE be pleased to state:

(a) whether keeping in view the excessive use of mobile phones by people, especially by youngsters, his Ministry proposes to conduct a study to find out its adverse health affects and Indian a Council of Medical Research has been asked to carry out the study;

(b) if so, whether Government has received the report; and

(c) if so, the details of the same and the action Government proposed to take in this egard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (c) According to Indian Council of Medical Research (ICMR) the available literature do not establish conclusive evidence on the safety or risk of Radio Frequency Radiation (RFR) but growing body of scientific evidences indicate towards the bio-effects and adverse health effects of RFR which may be possible, if not probable. The ICMR is, therefore, presently in the process of developing protocol to study the effect of RFR emitted from cell Phone and cell Masts on Male Reproduction on pilot basis. The Study is designed to be carried out for two years duration.

HIV/AIDS cases

2008. MS. PRAMILA BOHIDAR:
SHRI B.J. PANDA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is a steep fall in HIV/AIDS cases in the country;

(b) if so, the details thereof, indicating the status of this menace in Orissa State; and

(c) what is the time-frame within which the country would be AIDS-free?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) and (b) No, Sir. During 2006, the national estimates of 2 million to 3.1 million HIV infected persons have been arrived at by using multiple data sources including an expanded sentinel surveillance system and a nationwide community based survey, National Family Health Survey-3. The estimated prevalence rate is 0.36% (0.27 to 0.47%). The estimated prevalence rate in Orissa is 0.22%.

(c) The goal of the National AIDS Control Programme Phase-Ill is to halt and reverse the epidemic in the country over the next 5 years by integrating programmes for prevention, care, support and treatment.

T.B. cases

2009. SHRI JANARDHANA POOJARY: Will the Minister of HEALTH AND FAMILY
WELFARE be pleased to state:

(a) whether incidence of server strain of T.B. is highest in the country; and

(b) if so, the details of funds obtained from International institutions, donor agencies and budgetary allocations made for management and eradication of the disease and the amount spent thereon during the last three years, year-wise and State-wise?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) and (b) No, Sir. The estimated incidence of all cases per lakh population has come down from 184/lakh in 2001 to 168/lakh in 2006 (WHO Global TB report)

The funds received for RNTCP from different International agencies for the last three years is as under:—